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Bib Data Sheet

CONFIRMATION NO. 5149

SERIAL NUMBER 09/986,376	FILING DATE 11/08/2001 RULE	CLASS 606	GROUP ART UNIT 3731	ATTORNEY DOCKET NO. 00167-432001
APPLICANTS Dennis Colleran, North Attleborough, MA; Stefan Gabriel, Mattapoisett, MA;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 11/26/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance		STATE OR COUNTRY MA	SHEETS DRAWING 12	TOTAL CLAIMS 24
Verified and Acknowledged Examiner's Signature _____ Initials _____		INDEPENDENT CLAIMS 4		
ADDRESS JOEL R. PETROW Smith & Nephew, Inc. 1450 Brooks Road Memphis, TN 38116				
TITLE Tissue repair system				
FILING FEE RECEIVED 896	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

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